

Kansas Behavioral Health Risk Bulletin



Kansas Department of Health and Environment



February 23, 1996

Bureau of Chronic Disease and Health Promotion

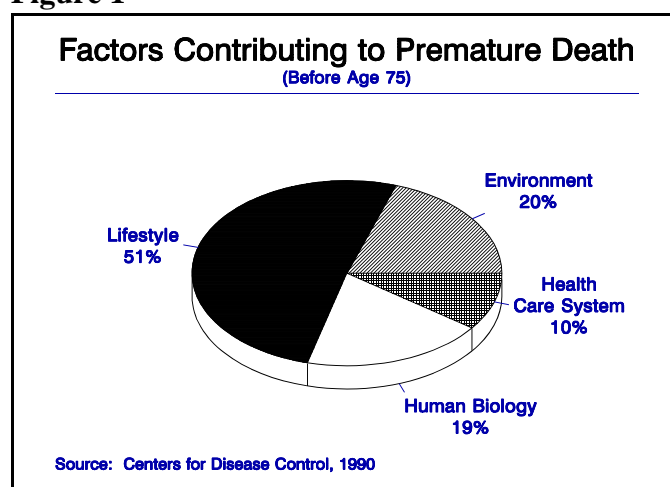
Vol. 1 No. 14

Executive Summary

Life expectancy from birth has risen from 47 years in 1900 to 75 years in 1990¹. This rise in life expectancy has been associated with a shift in the leading causes of death which have shifted from infectious diseases to chronic diseases. In 1900, the three leading causes of death were infectious diseases, 1) pneumonia and influenza; 2) tuberculosis; and 3) gastritis, enteritis, and colitis, accounting for 1/3 of all deaths. Today the three leading causes of death are chronic diseases, 1) heart disease; 2) cancer; and 3) stroke, accounting for 2/3 of all deaths¹. Chronic diseases are characterized by multiple risk factors, a long period of development, prolonged illness causing limitation and disability, and are rarely completely curable¹. Chronic disease and injury are also the leading causes of disability. Future dramatic improvements in the length and quality of life will require preventing the development of and complications resulting from chronic disease, primarily through lifestyle modification.

Approximately half of premature deaths are caused by lifestyle factors, 20% by environmental factors, 19% due to human biology, and 10% are due to the health care system (Fig. 1). This bulletin is the last in a series of fourteen, which present information about various risk factors and their consequences. It summarizes the frequency of health risks among Kansans caused by 8 lifestyle factors, 3 chronic diseases (diabetes, hypertension, and high blood cholesterol) and one health care risk factor (health care coverage) presented in the previous thirteen bulletins. For detailed information about each risk factor, refer to the individual bulletins. All data is from the 1993 BRFSS survey, unless otherwise noted.

Figure 1



Safety Belt Use (Fig. 2): Currently, only 52% of Kansans always wear a safety belt when they drive or ride in a car. Men, Kansans aged 18 to 24, and Kansans with lower household incomes and educational attainment are at increased risk.

Figure 2

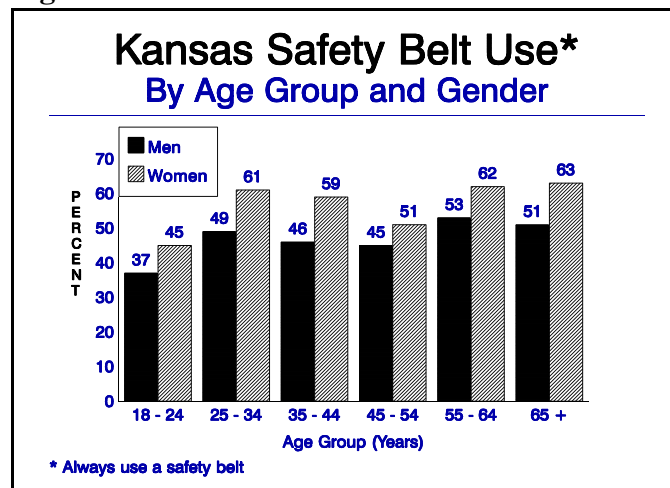
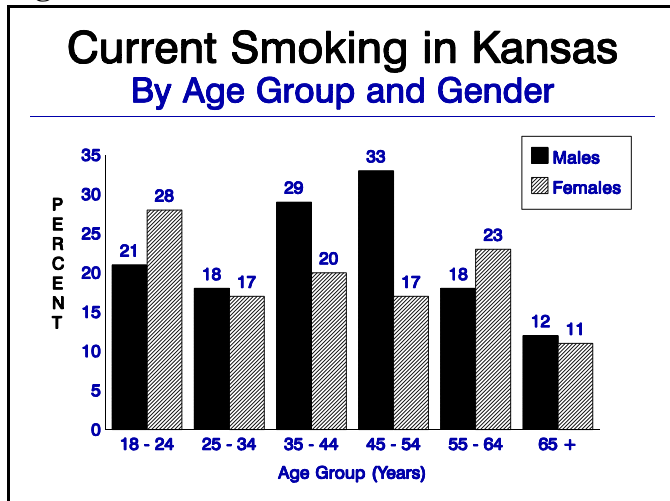
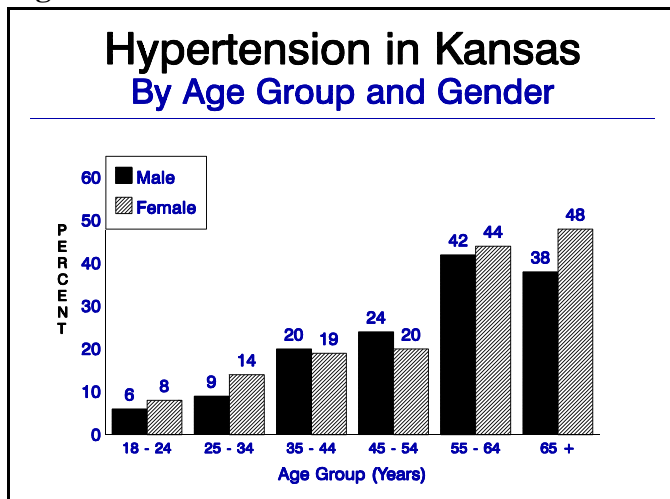


Figure 3



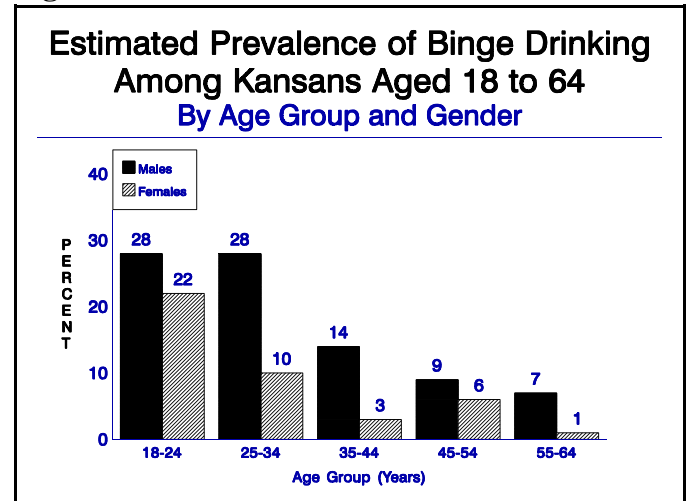
Cigarette Use (Fig. 3): Currently 20% of Kansans are cigarette smokers. Women aged 18 to 24, men aged 35 to 54, and Kansans with lower household incomes and educational attainment are more likely to be current smokers.

Figure 4



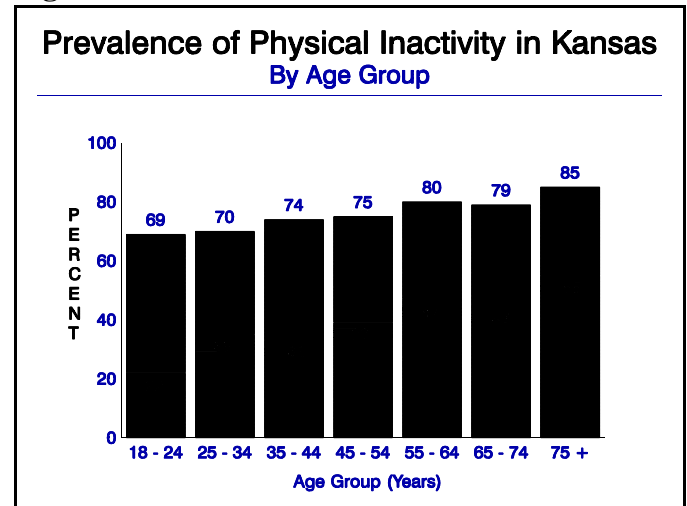
Hypertension (Fig. 4): Twenty-four percent of Kansans report having been told they are hypertensive. Persons at greater risk for hypertension include Kansans who are aged 55 and older, African-American, overweight, physically inactive, or have lower household incomes and educational attainment.

Figure 5



Alcohol Use (Fig. 5): Eleven percent of Kansans engage in binge drinking (consumed five or more drinks on an occasion), 2% report chronic drinking (60 or more drinks a month), and 3% report drinking and driving during the preceding month. Kansans aged 18 to 24, men, and never married Kansans are more likely to engage in these alcohol use patterns.

Figure 6

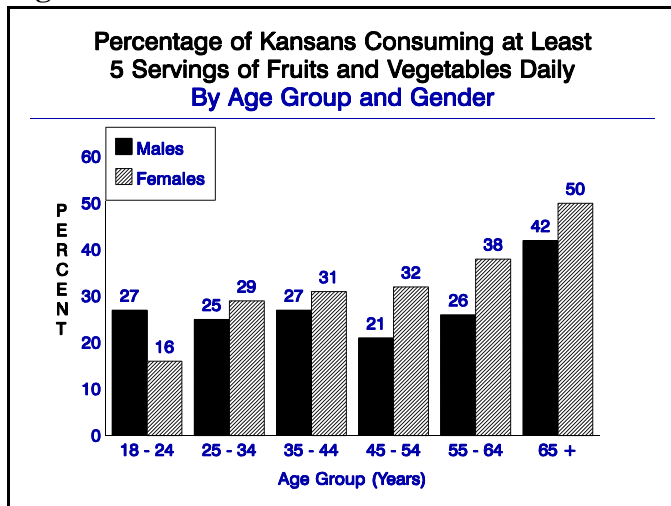


Physical Activity (Fig. 6): In Kansas, 75% of Kansans report that they are physically inactive (engaging in leisure time physical activity less than 3 times a week for 20 minutes each time). All demographic groups in Kansas need to improve their physical activity levels.

Fruit and Vegetable Consumption (Fig. 7): Among Kansans, only 31% indicate that they eat at least 5 servings of fruits and vegetables a day. All demographic groups in Kansas need to increase

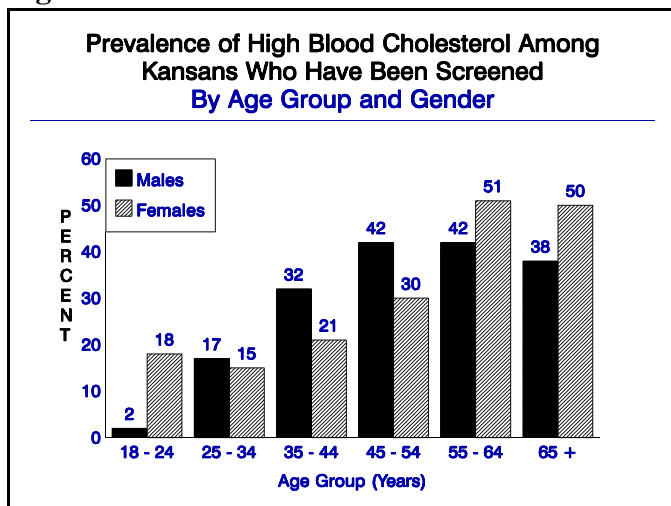
their fruit and vegetable consumption.

Figure 7



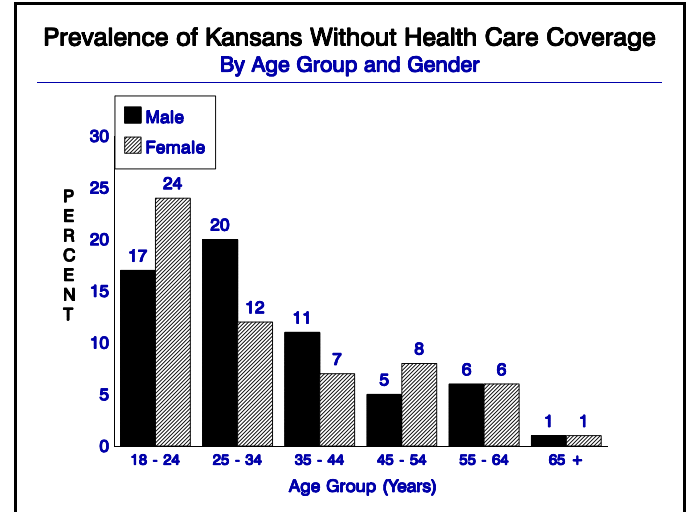
High Blood Cholesterol (Fig. 8): Among Kansans who had ever had their blood cholesterol checked, 32% report that they have high blood cholesterol. Kansans who are aged 55 and older, overweight, physically inactive, with a high school diploma or less, and with household incomes between \$15,000 to \$24,999 represent a higher proportion of persons having high blood cholesterol.

Figure 8



Health Care Coverage (Fig. 9): Ten percent of Kansans lack health care coverage. Kansans who

Figure 9

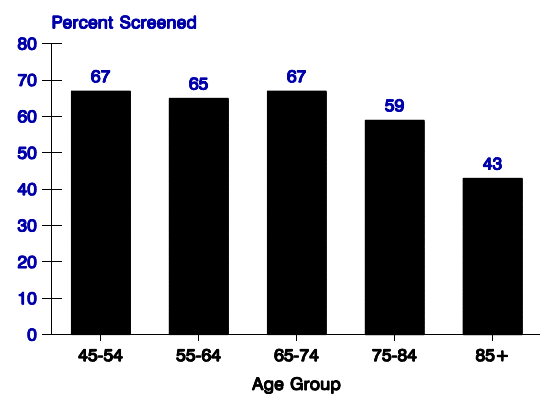


are aged 18 to 24, non-white, unemployed, unmarried, or who have lower levels of household income or educational attainment are at greater risk of being without health care coverage.

Mammogram and Clinical Breast Exam (Fig. 10): Combined 1993 and 1994 BRFSS data indicates that 63% of women over age 50 have had both a mammogram and a clinical breast exam within the past two years. Women who are aged 75 or older, not currently married or living with a partner, have no health care coverage, have lower household incomes, or who live in rural areas are less likely to have had a current mammogram.

Figure 10

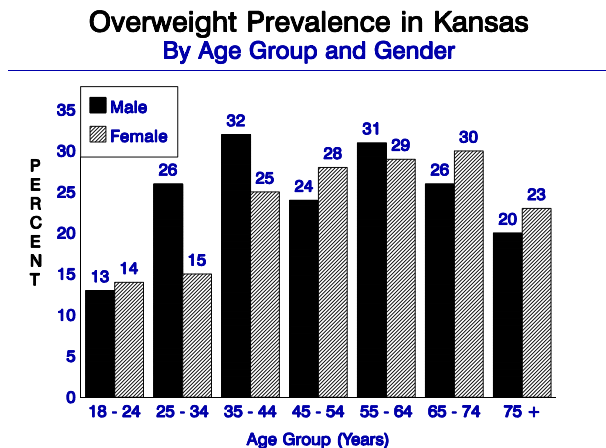
Had a Mammogram and Clinical Breast Exam Within the Last 2 Years By Age Group



* Based on body mass index (BMI). BMI is calculated by taking a person's weight in kilograms and dividing it by their height in meters squared (kg/m²). Males with a BMI equal to or greater than 27.8 and females with a BMI equal to or greater than 27.3 are considered overweight.

Overweight* (Fig. 11): Twenty-four percent of Kansans are overweight. Kansans who are African-American, Hispanic, aged 35 to 74, are or have

Figure 11



been married, or have lower levels of household incomes or educational attainment are at increased risk of being overweight.

Diabetes Mellitus (Fig. 12): The prevalence of diabetes mellitus among adult Kansans is 4.4%. Diabetes is more prevalent among Kansans who are African-American, Hispanic, or Native American, aged 65 and older, and Kansans with lower levels of household income and educational attainment.

AIDS/HIV Risk (Fig. 13): Thirteen percent of Kansans are "at risk" (self-reported risk was medium or high) for contracting HIV. Groups at increased self-reported risk for contracting HIV include Kansans who are African-American, Hispanic, male, aged 18 to 24, never married, and those with household incomes below \$10,000.

Figure 12

Diabetes Prevalence in Kansas By Age Group

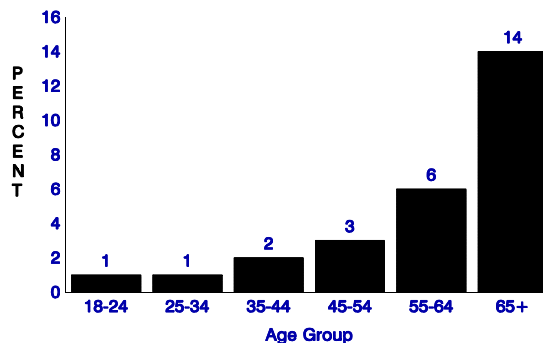
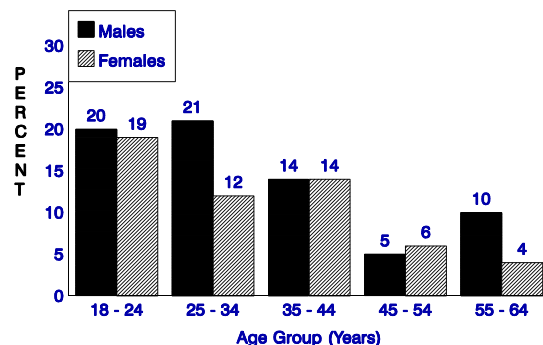


Figure 13

Prevalence of Kansans "At Risk" of Becoming Infected With HIV By Age Group and Gender



References:

- 1 Taylor WR, Marks JS, Livengood JR, Koplan JP. Current Issues and Challenges in Chronic Disease Control. IN: Brownson RC, Remington PL, Davis JR, eds. *Chronic Disease Epidemiology and Control*. APHA, Baltimore, MD: Port City Press, 1993: pp 1-18.

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Kansas Department of Health and Environment-BCDHP
Landon State Office Building
900 SW Jackson Suite 901N
Topeka, KS 66612-1290